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REPORT
OF THE
Medical Officer of Health
FOR THE
YEAR 1925.

ADAM WHITE,
M.D., M.R.C.P., D.P.H., D.T.M. and H.

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TO THE CHAIRMAN AND MEMBERS OF THE PUBLIC HEALTH COMMITTEE OF THE WOLSTANTON UNITED URBAN DISTRICT COUNCIL.

MR. CHAIRMAN, LADIES AND GENTLEMEN,

I have the honour to present to you the Annual Report upon the health of the United Urban District for the year 1925.

The birth-rate for the year is 19.6 per 1,000 of the estimated population. This rate, although it is much below the average for pre-war years, is higher than the corresponding rate this year for England and Wales as a whole, and for the various divisions into which the country generally is divided.

The death-rate, 13.12 per 1,000, is rather higher than the rates experienced in the area during recent years, but it is well below the average rate for the years immediately preceding the war. It is a little higher than the rate for the country generally.

The infantile mortality rate, 87.8 per 1,000, is above the rate experienced in the district during the previous three years, and it is also above the rate experienced in the country generally. However, the general trend of the infantile mortality rate of the area is downwards. This matter is dealt with in the body of the Report.

I desire to thank the members of the Committee generally for the support which they have given me throughout the year, and to express my thanks to all the members of the staff for the way in which they have co-operated with, and assisted, me.

I have the honour to be, Ladies and Gentlemen,

Your obedient servant,

ADAM WHITE,

Medical Officer of Health.

(1) NATURAL AND SOCIAL CONDITIONS OF THE AREA.

Area.—The area of the district is 5,422 acres: Wolstanton, 2,192 Chesterton, 1,408 Silverdale, 1,822.

Population.—At the 1921 Census the population of the district was found to be 29,232, the populations of the three Wards being as follows:—

Wolstanton Ward	13,558
Chesterton ,, ...	7,439
Silverdale ,, ...	8,235
Total	29,232

For the year 1925 the population of the district is estimated by the Registrar-General to be 30,170. For the purposes of Ward death-rates and birth-rates, etc., the population of the three Wards is estimated to be as follows:—

Wolstanton	14,142
Chesterton	7,574
Silverdale	8,454
Total	30,170

The following tabular statement shows the number of inhabited houses in each of the Wards, according to the 1921 Census :—

Wolstanton	2,962
Chesterton	1,418
Silverdale	1,727
Total	6,107

The following Table shows the number of families as separate occupiers in each of the Wards :—

Wolstanton	3,026
Chesterton	1,430
Silverdale	1,744
Total	6,200

The Rateable Value of the district is as follows :—

	£	s.	d.
Wolstanton	67,910	8	3
Chesterton	28,771	3	9
Silverdale	30,537	8	6
Total	£127,219	0	6

Sum Represented by a Penny Rate.—A rate of a penny in the £ is estimated to produce £530 gross and £477 nett for the General District Rate.

PHYSICAL FEATURES AND GENERAL CHARACTER OF THE DISTRICT.

The United Urban District is made up of the three townships of Wolstanton, Silverdale and Chesterton, together with a considerable area of open country lying around and between these townships. The area is divided into three Wards, which are named after the townships alluded to above. In addition to the townships, the district contains the following small villages or hamlets situated in the different Wards as follows :—

Crossheath, Knutton, Blackbank and High Lane.—
Silverdale Ward.

Longbridge Hayes, Maybank and Chatterley.—
Wolstanton Ward.

Springwood and part of the village of Red Street.—
Chesterton Ward.

The three main roads, each of which leads from one of the three townships—Wolstanton, Chesterton and Silverdale—converge and meet at the adjoining Borough of Newcastle-under-Lyme.

The United Urban District is bounded by the City of Stoke-on-Trent on the north and east, by the Borough of Newcastle-under-Lyme on the south, and by the Audley Urban District on the west.

SOCIAL CONDITIONS AND CHIEF OCCUPATIONS.

The following industries are situated within the district :—

Wolstanton ...	1 Colliery.
	3 Brick Yards.
	1 Chemical Works.
	1 Pottery.
	1 Brass Foundry.
	1 Doll Factory.
Silverdale ...	1 Coal Mine.
	1 Iron Works (Knutton).
	2 Brick Yards.
	1 Cotton Factory (Cross Heath).
	1 Bone Works.
Chesterton ...	2 Ironstone Mines.
	4 Coal Mines.
	7 Brick Yards.
	3 Blast Furnaces (Apedale).
	1 Bye-Products' Works.

In Silverdale and Chesterton the male population is chiefly engaged in the local industries, specified above, but a considerable proportion, especially in Silverdale, is occupied in coal mines situated outside the district.

In the case of Wolstanton, part of the population works in the potteries of the adjoining City of Stoke-on-Trent, and in mines and ironstone works outside the district.

Female labour from all parts of the district is employed at the Enderley Mills (a clothing manufactory) in Newcastle. A number of female operatives from Wolstanton work in the potteries of the adjoining County Borough, and a few in the brickyards. The cotton factory at Cross Heath employs the majority of females in that neighbourhood, as well as others coming from Silverdale and Chesterton. Many of the female operatives living in Silverdale and Chesterton are employed in the local brickyards, while others, especially those from the township of Silverdale, are employed at fustian cutting works of which there are three in Newcastle and one in the Parish of Keele, outside the south-west boundary of the district.

AMOUNT OF POOR LAW RELIEF.

I am indebted to Mr. T. Wood, clerk to the Union of Wolstanton and Stoke, for the information contained in the following Table, which shows the amount of relief granted in the area during the financial year ended March 31st, 1926 :—

Parish	Unemployed			Ordinary			Totals		
	£	s	d	£	s	d	£	s	d
Wolstanton ...	203	14	3	2035	19	3	2239	13	6
Chesterton ...	104	2	0	1971	4	0	2075	6	0
Silverdale ...	295	18	9	2678	7	11	2974	6	8
	603	15	0	6685	11	2	7289	6	2

EXTENT TO WHICH HOSPITALS ARE UTILISED.

Mr. W. Stevenson, Secretary and House Governor of the North Staffordshire Royal Infirmary, has been good enough to inform me that during the year 1925, 304 in-patients and 1,862 out-patients coming from the Wolstanton Urban District received treatment at that hospital.

TABLE 1.—Vital Statistics of whole district during 1925 and previous years.

YEAR	Population estimated to Middle of each Year	BIRTHS			TOTAL DEATHS REGISTERED IN THE DISTRICT		TRANSFERABLE DEATHS		NETT DEATHS BELONGING TO THE DISTRICT			
		Uncorrected Nos.	NETT		No.	Rate	Of Non-Residents in the District	Of Residents not registered in the District	Under 1 year of age		At all Ages	
			No.	Rate					No.	Rate per 1,000 Nett Births	No.	Rate
1911	27341	—	831	30.3	379	13.8	8	50	130	156	421	15.3
1912	27928	—	810	29.0	330	11.5	8	47	81	100	369	13.2
1913	28515	—	800	28.05	377	13.2	14	42	118	147	405	14.09
1914	28967	—	815	28.09	348	12.01	12	40	91	111	376	12.9
1915	27614	—	750	27.1	335	12.0	9	50	69	92	376	13.6
1916	26774 29131	—	626	21.4	349	13.03	35	58	54	86	372	13.8
1917	27704 30882	—	553	17.9	287	10.3	14	46	59	106	319	11.5
1918	26860 30096	—	607	20.16	370	13.7	8	53	60	98	415	15.4
1919	29280 30501	—	636	20.8	321	10.9	4	50	51	80	367	12.5
1920	30447	—	826	27.1	305	10.0	6	43	62	75	342	11.2
1921	29810	—	752	25.2	311	10.4	8	58	81	107	361	12.1
1922	29960	633	639	21.3	298	9.94	9	58	55	86	347	11.6
1923	30060	579	583	19.4	281	9.34	14	70	39	67	337	11.21
1924	30060	603	613	20.4	247	8.21	7	80	42	68.5	320	10.64
1925	30170	578	592	19.6	313	10.37	5	88	52	87.8	396	13.12

From 1916 to 1919 two populations are given as supplied by the Registrar General, the first being used for the death-rate calculations, and the second for the birth-rate calculation.

TABLE II.—Birth-rate, Death-rate, and Analysis of Mortality during the year 1925.

(Provisional figures. The rates for England and Wales have been calculated on a population estimated to the middle of 1925, while those for the towns have been calculated on populations estimated to the middle of 1924. The mortality rates refer to the whole population as regards England and Wales, but only to civilians as regards London and the groups of towns.)

—	Birth Rate per 1,000 total population	ANNUAL DEATH-RATE per 1,000 Population									Rate per 1,000 Births		Percentage of Total Deaths		
		All Causes	Enteric Fever	Small-pox	Measles	Scarlet Fever	Whooping-cough	Diphtheria	Influenza	Violence	Diarrhœa & Enteritis (under 2 Years)	Total Deaths under One Year	Causes of Death Certified by Registered Medical Practitioners.	Inquest Cases	Uncertified Causes of Death
England and Wales ..	18.3	12·2	0·01	0·00	0·13	0.03	0·15	0·07	0·32	0·47	8·4	75	92.1	6·9	1.0
105 County Boroughs and Great Towns, including London	18·8	12·2	0·01	0·00	0·17	0·03	0·18	0·09	0·30	0·43	10·8	79	92·1	7·3	0.6
157 smaller Towns (1921 Adjusted populations–20,000-50,000) ..	18·3	11·2	0·01	0·00	0·15	0·02	0·14	0·06	0·31	0·38	7·6	74	93·0	5·9	1.1
London	18·0	11·7	0·01	0·00	0.08	0·02	0·19	0·11	0·23	0·46	10·6	67	91.1	8·9	0·0
Wolstanton United Urban District ..	19·6	13·12	·033	—	·066	0.066	·232	·099	·364	·662	8·4	87.8	90.65	7·82	1·53

VITAL STATISTICS.—YEAR 1925.

Births and Birthrates.

	Totals.	Males.	Females.
Legitimate... ...	575	308	267
Illegitimate ...	17	11	6
Totals ...	592	319	273

The nett number of births credited to the district is 592 (Males 319, Females 273), yielding a birth-rate of 19.6 per 1,000 of the estimated population. This rate, although lower than that usually experienced in the district, is higher by 1.3 per 1,000 than the rate for the country generally, and it is also higher than the principal divisions into which the country is divided for statistical purposes.

The births actually registered in the district numbered 578 (Wolstanton 225, Chesterton 167, Silverdale 186).

The following Table shows the birth-rates for each portion of the district for the last 11 years :—

Year	Wolstanton	Chesterton	Silverdale	Total
1915	24.9	30.6	27.5	27.1
1916	20.03	21.5	23.8	21.4
1917	14.2	21.6	20.9	17.9
1918	16.2	23.4	24.2	20.16
1919	17.07	23.8	23.06	20.8
1920	25.1	30,4	26.8	27.1
1921	23.8	26.1	26.4	25.22
1922	19.02	21.23	24.07	21.3
1923	17.72	21.15	20.13	19.4
1924	18.14	20.88	22.5	20.4
1925	15.91	22.05	21.99	19.6

Deaths and Death-rates.

The total number of deaths registered in the district was 313, which corresponds to a crude annual death-rate of 10.37 per 1,000 of the estimated population. In addition, there were 88 deaths among residents of the district which were registered outside the district, and five deaths were registered in the district which have been assigned to other areas by the Registrar-General. The corrected number of deaths thus becomes 396 (204 males and 192 females), which number corresponds to a recorded death-rate of 13.12 per 1,000 of the estimated population. Table III. (Page 13) shows the deaths as classified by the Registrar-General, and Table IV. (Page 14) shows the principal causes of death as classified locally, together with the age constitution and distribution among the three Wards.

The death-rate for this year, 13.12 per 1,000, is rather higher than the rates experienced in the district during recent years (all of which rates have been below the corresponding rates for the country generally), but it is well below the average rate for the years immediately preceding the war. It is a little higher than the rates for the country generally and the principal divisions into which the country is divided for statistical purposes. The rise in the rate this year is accounted for principally by slight increases in the individual death-rates due to respiratory diseases, disease of the heart, arterio sclerosis and cerebral hemorrhage, cancer, violence and tuberculosis.

The following Table gives the death-rates for each portion of the district since 1915 :—

Year	Wolstanton	Chesterton	Silverdale	Total
1915	12.9	14.2	14.1	13.6
1916	12.7	16.8	13.04	13.8
1917	10.6	10.5	13.7	11.5
1918	14.4	14.9	17.5	15.4
1919	11.2	11.6	14.4	12.5
1920	12.4	11.05	9.4	11.2
1921	13.2	12.8	9.6	12.1
1922	10.5	11.67	13.45	11.6
1923	9.1	14.41	11.84	11.21
1924	10.95	8.85	11.72	10.6
1925	13.42	12.41	13.24	13.12

Table V. (Page 15) gives the deaths which have occurred each year in the Urban District since its formation, classified according to the percentage in various age groups. This Table must not be taken as showing more than the percentage age composition of what may be called the population dying annually ; but it is interesting, inasmuch as it shows the great reduction in the percentage of deaths under one year and from one to five years, and the great increase in the percentage dying at 65 years and over.

TABLE III.—Causes of Death during 1925.

	Causes of Death.	Males	Females
	All Causes	204	192
1	Enteric Fever	—	1
2	Small-pox	—	—
3	Measles	2	—
4	Scarlet Fever	—	2
5	Whooping Cough	4	3
6	Diphtheria	2	1
7	Influenza	8	3
8	Encephalitis Lethargica	—	—
9	Meningococcal Meningitis	—	—
10	Tuberculosis of respiratory system	17	17
11	Other Tuberculous disease	4	3
12	Cancer, malignant disease	15	24
13	Rheumatic Fever	—	3
14	Diabetes	2	2
15	Cerebral Hæmorrhage, &c.	13	17
16	Heart disease	22	27
17	Arterio-sclerosis	12	7
18	Bronchitis	23	14
19	Pneumonia (all forms)	24	5
20	Other respiratory diseases	2	1
21	Ulcer of stomach or duodenum	2	—
22	Diarrhœa, &c. (under 2 years)	3	2
23	Appendicitis and typhlitis	—	2
24	Cirrhosis of liver	1	—
25	Acute and chronic nephritis	4	6
26	Puerperal sepsis	—	—
27	Other accidents and diseases of pregnancy and parturition	—	4
28	Congenital debility and malformation, premature birth	15	11
29	Suicide	1	—
30	Other deaths from violence	12	7
31	Other defined diseases	16	29
32	Causes ill-defined or unknown	—	1

TABLE V.

Year	Number of Deaths	Death-Rate	PERCENTAGE OF DEATHS OF VARIOUS AGE GROUPS.					
			Under 1	1 and under 5	5 and under 15	15 and under 25	25 and under 65	65 and over
1905	388	14.95	30.1	14.1	1.1	4.3	30.1	19.8
6	315	11.7	30.1	16.8	5.7	2.8	25.3	19
7	377	13.5	27.8	11.4	3.1	3.7	33.1	20.6
8	356	12.3	30.06	8.4	5.6	2.8	29.2	23.3
9	350	11.7	26.5	16.5	3.7	4.0	26.0	23.1
1910	351	11.3	26.7	9.7	3.4	3.7	31.9	24.5
11	421	15.3	30.8	11.3	4.5	3.3	29.6	20.1
12	369	13.2	21.9	8.6	5.6	3.2	32.5	27.9
13	405	14.09	29.1	9.8	5.1	2.9	29.8	22.9
14	376	12.9	24.2	9.7	4.7	3.4	32.1	25.5
15	376	13.6	18.3	9.2	5.8	5.5	32.6	28.0
16	372	13.8	14.5					
17	319	11.5	18.4					
18	415	15.4	12.03					
19	367	12.5	13.8					
1920	342	11.2	18.1	8.05	7.5	5.27	33.55	28.1
21	361	12.1	22.4	5.96	4.87	4.33	34.68	28.63
22	347	11.6	15.8	8.35	4.3	7.2	32.85	31.4
23	337	11.2	11.6	6.25	4.46	6.25	35.71	35.71
24	320	10.64	13.12	9.06	3.44	4.06	36.25	34.06
25	396	13.12	13.13	9.85	3.79	4.54	34.85	33.84

NOTE :—Figures to make the calculation for the years 1916 to 1919 (with the exception of those relating to infant deaths) are not available.

TABLE IV. THE PRINCIPAL CAUSES OF DEATH DURING 1925.

CAUSES OF DEATH	TOTAL DEATHS — AT ALL AGES													IN EACH WARD		
	AT ALL AGES	Under 1 year	1 under 2	2 under 3	3 under 4	4 under 5	5 under 10	10 under 15	15 under 20	20 under 35	35 under 45	45 under 65	65 and over	Wolstanton	Chesterton	Silverdale
Scarlet Fever	2						1		1					1		1
Measles	2		2											2		
Whooping Cough ..	7		5	1			1							3	1	3
Diphtheria	3			1			1					1			3	
Influenza	11				1		1			3	2	1	3	6	3	2
Meningococcal Meningitis																
Tuberculosis of Respirat'ry System	34		2					2	3	8	7	11	1	16	10	8
Other Tubercul's diseases	7	1	3			1	1	1						1	6	1
Cancer, Malignant disease	39										3	18	18	25	5	9
Rheumatic Fever ..	3							1		1			1	1		2

Heart Disease																
Arterio Sclerosis ..	19											4	15	8	1	10
Bronchitis	41	9	2			2						7	21	23	10	8
Pneumonia	29	2	7	3			1		1	2	3	6	4	13	6	10
Other Respiratory Diseases	2		1							1				1		1
Ulcer of Stomach or duodenum ..	2											2			1	1
Diarrhœa	6	5											1		2	4
Appendicitis	2											1	1	1	1	
Cirrhosis of the Liver ..	1											1			1	
Acute & Chronic Nephritis	10									1	5		4	7	2	1
Puerperal Sepsis ..																
Other Accidents & Diseases of Pregnancy ..	4									2	2			1	1	2
Congenital Debility, etc.	26	25	1											7	10	9
Suicide	1									1				1		
Other deaths from Violence	19				1	1	4			5	2	3	3	8	4	7
Diseases of Nervous system	4										1	1	2	3		1
Senility	9												9	4	1	4

It is interesting to compare the chief causes of death operating in the Urban District with the chief causes recorded in England and Wales as a whole. The latest figures obtainable for England and Wales are those for 1924, and the following Table shows for the years 1921 to 1924 the relative importance from a percentage point of view of the chief causes of death in the Urban District and in England and Wales :—

	England and Wales Percentage for the years 1921 to 1924	Wolstanton United Percentage for the years 1921 to 1924
Diseases of the heart	11.9	12.04
Cancer	10.29	7.81
Tuberculosis	8.99	8.98
Pneumonia	7.91	8.47
Bronchitis	7.76	10.42
Premature birth, Atrophy, Debility and Marasmus, &c., Developmental and Wasting Diseases of Infancy ..	5.46	6.33

It will be seen that in the figures given in this Table there is a general similarity between the experience of the United Urban District and that of the country generally except that the district is in a more fortunate position as regards cancer, but less fortunate in the case of bronchitis heart disease and prematurity, etc., although in the last two instances the excess is relatively a small one.

TABLE VI.—Shewing the principal causes of death in the United District since 1914.

	1914	1915	1916	1917	1918	1919	1920	1921	1922	1923	1924	1925
Respiratory Diseases ...	73	80	76	68	88	92	58	56	64	73	73	69
Heart Disease	28	33	38	30	28	35	37	36	59	40	30	49
Zymotic Diseases ...	32	32	43	14	17	16	30	22	23	21	13	20
Phthisis	26	22	24	20	19	19	19	20	22	30	21	34
Other tuberculous diseases	5	20	10	11	8	2	6	7	3	11	8	7
Cancer	29	22	17	23	13	28	22	28	17	28	33	39
Congenital Debility, etc. ...	40	22	19	27	21	20	29	40	24	10	14	26
Kidney diseases	13	10	6	7	6	4	15	2	5	5	3	10
Others	130	135	139	119	215	151	126	150	130	119	125	142
Total ...	376	376	372	319	415	367	342	361	347	337	320	396

Diseases of the Respiratory System.

There were 29 deaths from pneumonia (Wolstanton 13, Chesterton 6, Silverdale 10), which corresponds to an annual death-rate of .961 per 1,000 of the population. There were 41 (R.G. 37) deaths from bronchitis (Wolstanton 23, Chesterton 10, Silverdale 8), equal to an annual death-rate of 1.359 (R.G. 1.226).

Both these rates are a shade higher than the average for England and Wales in recent years. Both these diseases taken together account for a considerable proportion of the total mortality, both of England and Wales as a whole and of the Urban District.

Pneumonia is frequently a primary condition, whereas bronchitis occurs both as a primary condition and as a secondary complication in many other diseases. The chief factors in the prevention of pneumonia are the avoidance of chill, of debilitating conditions of life and of sources of infection. Once a person has contracted pneumonia, the chances of survival vary very much with the nursing facilities available, and it is one of the diseases in which the services of a district nurse or, alternatively, institutional treatment is particularly valuable.

Diseases of the Heart.

There were 49 deaths from diseases of the heart (Wolstanton 24, Chesterton 13, Silverdale 12), which corresponds to an annual death-rate of 1.624 per 1,000. This rate is rather higher than that experienced in the country generally during recent years, and the Table on Page 10 shows that diseases of the heart have the highest percentage incidence in the mortality of the district. It is generally believed that most cases of valvular disease of the heart are due to rheumatism, whereas disease of the body of the heart itself is generally held to be associated with factors such as heredity, the general mode of life, work (mental and physical) at high pressure, dietetic and alcoholic excesses, syphilis, kidney disease, etc., which act sometimes singly, but more often in a variety of combinations, and so produce degeneration of the heart and blood vessels. While, however, valvular disease of the heart is undoubtedly due in the majority of cases to rheumatism, and while the toxic cases stated as being operative in the causation of disease of the body of the heart undoubtedly exercise their fell influence, hard manual toil, leading as it does to premature breakdown of the compensatory mechanism of the heart, increases the number of deaths certified as being due to heart disease and lowers the age at which the fatal issue supervenes.

Arterio Sclerosis and Cerebral Haemorrhage.

There were 49 deaths from cerebral haemorrhage and arterio sclerosis, which number equals a death-rate of 1.624. This rate is rather higher than that experienced in the country during recent years. Arterio sclerosis and cerebral haemorrhage are due to the conditions already stated as being causative factors in the ætiology of disease of the body of the heart and of the blood vessels.

Cancer.

There were 39 deaths certified as being due to cancer or malignant disease, which corresponds to a death-rate of 1.292 per 1,000 of the population. This rate is much higher than the average for the district in recent years, and it is higher than the rate recently experienced in England and Wales as a whole.

Much valuable work has been done recently on the causation of malignant disease, and it would appear that we are almost in sight of a solution of the cancer problem. However, at the present time early operation is the only treatment which gives any real hope of cure, and, therefore, anyone who has any reason to think that he may be suffering from cancer should not waste any time using "home remedies," etc., but should consult a doctor at once.

Deaths Due to Violence.

There were 20 deaths ascribed to violence (Wolstanton 9, Chesterton 4, Silverdale 7). Of these deaths one was due to suicide and 19 to other forms of violence, all accidental. The deaths are analysed according to age, sex and cause of death, etc., in Table VII. (Page 21). The total number of deaths due to accidental violence corresponds to an annual death-rate of .629, while the number of deaths (three) due to accidents in mines is equal to a death-rate of .099. Both these rates are above the average experienced in the country recently.

Senility or Old Age.

There were nine deaths ascribed to this cause. The death rate is, therefore, .298 per 1,000, which is a smaller rate than the average experienced in England and Wales in recent years. In the country generally the death-rate from this cause has fallen from .970 in 1906 to .662 in 1924, the fall having been pretty steady, except during the years 1915 to 1917, when there were some upward fluctuations. It should be possible to reduce this rate very considerably, if not to abolish it altogether, for its continuance at anything above a minimal level implies lack of care and accuracy in the certification of causes of death. Even in the case of very old persons, it should generally be possible to specify the system or organ (*e.g.*, the heart, blood vessels, kidney, brain, etc.), which has been affected in the passage of the years, and the particular degenerative change or disease (*e.g.*, fibroid or fatty heart, arterio sclerosis, nephritis or senile dementia, etc.) which has affected it, and which is the actual cause of death.

TABLE VII.—Deaths due to Violence.

CAUSES OF DEATH	TOTAL DEATHS																														In each Ward						Died in Hospital		Died otherwise than in Hospital		Inquests	
	At all ages		AT ALL AGES																												Wolstanton		Chesterton		Silverdale							
			Under 5		5 and under 10		10 and under 15		15 and under 20		20 and under 25		25 and under 30		30 and under 35		35 and under 40		40 and under 45		45 and under 50		50 and under 55		55 and under 60		60 and under 65		65 and over													
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F
Accidents connected with the coal Mining Industry ..	2																		1						1										2		2				2	
Accid's in Stone Mining and Quarrying ..	1										1																				1						1				1	
Burns and Scalds ..		1		1																														1				1				1
Accidents due to Motor Cars and Cycles ..	3	2	1			1						1															1		1		1	1	1	1	1		2		1	2	3	2
Accidents due to horse drawn vehicles	1				1																												1						1		1	
Accidents due to Railway trains	1																												1						1				1		1	
Suicide	1														1																1								1		1	
Falls		1												1																		1								1		1
Other Accidents ..	4	3			1	1					1					1			1						1					1	3	1			1	2	3		1	3	4	3
ALL CAUSES	13	7	1	1	2	2					2	1		1	1	1			2						2		1		2	1	6	3	2	2	5	2	8	1	5	6	13	7

Deaths Connected with Childbirth.

There were four deaths ascribed to causes connected with child-bearing, all of which were due to causes other than puerperal sepsis. The total death-rate from all causes connected with childbirth is, therefore, .132, the corresponding rate for England and Wales for 1924 being .141.

The following Table shows the death-rate per 1,000 of population due to causes connected with child-bearing compared with the corresponding rate for England and Wales for each year since 1921 :—

	All Causes		Puerperal Sepsis	
	Wolstanton U. Urban District	England and Wales	Wolstanton U. Urban District	England and Wales
1921	.1	.168	.033	.059
1922	.1	.149	.033	.054
1923	—	.144	—	.049
1924	.099	.141	.066	.05
1925	.132		—	

The following Table shows the maternal mortality rates calculated per 1,000 births for the same years :—

	All Causes		Puerperal Sepsis	
	Wolstanton U. Urban District	England and Wales	Wolstanton U. Urban District	England and Wales
1921	5.24	2.53	1.74	1.38
1922	4.7	2.43	1.56	1.38
1923	—	2.52	—	1.30
1924	4.89	2.51	3.26	1.39
1925	6.76		—	

Examination of the immediately preceding Table will show that while the average death-rate due to puerperal sepsis is much the same in the Urban District as in the country generally, the average death-rate from all causes of maternal mortality is higher in the Urban District than in England and Wales as a whole. The explanation of the relative height of the maternal mortality in the Urban District is in all probability to be found in the pausity of hospital beds for the treatment of complications arising during pregnancy, labour and the puerperium.

TABLE VIII. An Analysis of Infant Deaths according to Age and Cause of Death.

CAUSE OF DEATH	Under one week		1—2 Weeks		2—3 Weeks		3—4 Weeks		Total under four weeks		4 weeks and under 3 m'ths		3 months and under 6 m'ths.		6 months and under 9 m'ths.		9 months and under 12 m'ths.		Total deaths under 1 year		Wolstanton		Chesterton		Silverdale	
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F
All Causes	11	6	4	5	1	—	1	—	17	11	4	2	3	2	3	4	4	2	31	21	9	6	10	7	12	8
Whooping Cough ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Measles	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	1	—	1	—	—	—	—	—
Tuberculous Meningitis ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Abdominal Tuberculosis ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	1	—	—	—	1	—	—	—
Other forms of Tuberculosis	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Convulsions	1	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	1	—	1	—	—	—	—	—
Bronchitis	—	—	—	—	—	—	—	—	—	—	—	—	2	—	1	3	2	1	5	4	2	1	1	—	2	3
Pneumonia all forms ..	—	—	—	—	—	—	—	—	—	—	1	—	—	1	—	—	—	—	1	1	1	—	—	—	—	1
Diarrhœa	—	—	—	—	—	—	—	—	—	—	1	—	1	—	1	1	—	—	3	1	—	—	1	—	2	1
Enteritis	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	1	—	—	—	1	—	—
Gastro—Enteritis ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Gastritis	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Congenital Malformations ..	1	1	2	—	—	—	1	—	4	1	—	—	—	—	—	—	—	—	4	1	1	1	2	—	1	—
Premature Birth ..	7	3	—	3	—	—	—	—	7	6	1	1	—	—	—	—	—	—	8	7	1	2	3	3	4	2
Congenital Debility ..	1	2	—	1	—	—	—	—	1	3	—	—	—	—	—	—	—	—	1	3	—	—	—	2	1	1
Atrophy and Maramus ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	1	—	1	—	—	—	—
Icterus Neonatorum ..	—	—	1	—	—	—	—	—	1	—	1	—	—	—	—	—	—	—	2	—	1	—	1	—	—	—
Venereal disease ..	—	—	1	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	1	—
Difficult Labour ..	1	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	1	—	1	—	—	—	—	—
Diseases of the Skin ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	1	—	—	—	—	—	1	—
Cerebro-spinal Fever ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Rickets	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Umbilical Haemorrhage ..	—	—	—	—	1	—	—	—	1	—	—	—	—	—	—	—	—	—	1	—	—	—	1	—	—	—
Heart Failure	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	1	—	1	—	—	—	—
Overlaying	—	—	—	1	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	1	—	—	—	1	—	—

TABLE IX.—Is an analysis of Infantile Mortality for each year since 1913.

	1913	1914	1915	1916	1917	1918	1919	1920	1921	1922	1923	1924	1925
Measles		1		3	1	2				—	2	—	1
Whooping Cough...	2	1	2	2	1	1	5	3	3	4	1	—	—
Diarrhœa & Enteritis	13	9	8	6	3	2	4	6*	15*	10*	4	11*	5
Bronchitis ...	13	5	11	11	6	5	3	3	6	7	5	3	9
Pneumonia ...	13	12	8	5	10	11	3	3	5	3	7	10	2
Congenital Malformation, Debility and Marasmus ...	29	18	8	4	11	6	5	16	16	14	3	3	11
Prematurity ...	19	21	14	12	14	13	15	13	24	10	7	11	15
Suffocation ...	2	1	1		2		1		1	—	—	1	1
Convulsions ...	14	7	8	4	4	11	5	5	3	3	1	1	1
Others	8	16	9	7	7	9	10	13	8	4	9	2	7
Total	113	91	69	54	59	60	51	62	81	55	39	42	52

* Includes Gastritus.

Infantile Mortality.

The following Tables show the infantile mortality rate of the district as a whole and for each of its constituent Wards :—

INFANT MORTALITY, 1925.

Whole District.				
Total Rate for both sexes	Males	Females	Total Legitimate Rate	Total Illegitimate Rate
87.8	97.15	76.92	83.3	235.3

INFANT MORTALITY, 1925.

Constituent Wards		
Wolstanton	Chesterton	Silverdale
66.66	101.8	107.52

The following Table shows the infant mortality rates in the various parts of the United District since 1915 :—

	Wolstanton		Silverdale		Chesterton		Whole District	
Year	No of D'ths	Rate	No of D'ths	Rate	No of D'ths	Rate	No of D'ths	Rate
1915	30	95	16	74	23	104	69	92
1916	21	75	11	59	22	137	54	86
1917	29	141	20	116	10	59	59	106
1918	17	72	22	113	21	118	60	98
1919	20	76	17	88	14	77	51	80
1920	26	75	13	56	23	95	62	75
1921	36	111	16	71	29	142	81	107
1922	25	91.24	13	63.3	17	106.25	55	86
1923	9	36.14	14	82.35	16	100	39	67
1924	21	82.35	14	73.7	7	44.3	42	68.5
1925	15	66.66	20	107.52	17	101.8	52	87.8

The following Table shows the infant mortality rate for each year since 1906 :—

Year	Number of deaths	Rate per 1000 births	Year	Number of deaths	Rate per 1000 births
1906	95	112	1916	54	86
1907	105	128	1917	59	106
1908	109	126	1918	60	98
1909	93	113	1919	51	80
1910	94	114	1920	62	75
1911	130	156	1921	81	107
1912	81	100	1922	55	86
1913	113	147	1923	39	67
1914	91	111	1924	42	68
1915	69	92	1925	52	87.8

The infantile mortality rate for this year is above the rates experienced in the district during the previous three years, and it is also above the rate experienced in the country generally. This rate has, however, shown a steady decrease in the Urban District during the last 20 years, with upward fluctuations in 1917, 1921 and to a less extent this year. In my last Annual Report, when speaking on the then infantile mortality rate, which was one of the lowest ever experienced in the district, I stated my belief that the maintenance of the reduction in the infantile death-rate depended largely on a continued reduced level of the number of deaths due to prematurity, congenital malformations, etc. (commonly known as the wasting and developmental diseases of infancy). In the light of that statement, it is interesting to note that the rise in the infantile mortality rate this year is due almost entirely to the increased number of deaths experienced this year from these causes.

The rate due to the wasting and developmental diseases as a whole is 45.6 per 1,000, the corresponding rate for England and Wales being approximately 30 per 1,000. Taking prematurity alone, the rate for the Urban District is 25.33 per 1,000, the corresponding rate for England and Wales being approximately 18 per 1,000.

The wasting and developmental diseases of infancy, particularly prematurity, can be attacked by preventive measures only if such measures are brought into operation at a sufficiently early period in pregnancy. Unfortunately, the majority of women do not attend at the maternity centres soon enough to make preventive measures effective; but it is hoped that as the work of these centres becomes more widely known and more adequately appreciated, an increasing number of expectant mothers will attend at such a time as to obtain the maximum benefit from the influences which can be brought to bear upon them at the centres.

The rate due to diarrhœa and enteritis for the Urban District is 8.44 per 1,000 births, the corresponding rate for the country generally being 6.3. Although this rate is rather above that for the country generally, it is very satisfactory to note that it is much lower than last year's Urban District rate, which was 17.9. Diarrhœa and enteritis are due in part to food infection (privies forming a ready source of such infection) and in part to errors of diet. I trust that the forward policy of the Council in the matter of privy conversion and the teaching of proper methods of feeding at the Child Welfare Centres will in time lead to the complete elimination of deaths from these causes.

Causes of Sickness, etc., which have been noteworthy in the Area.

In my Annual Report for the year 1923 I included special reports on the death-rate in the Chesterton Ward and on the effect of the non-domestic employment of women on infantile mortality.

The same Annual Report contained particulars of an outbreak of food poisoning which occurred during the year 1923 in the Chesterton Ward.

(2) GENERAL PROVISION OF HEALTH SERVICES IN THE AREA.

SUMMARY OF NURSING ARRANGEMENTS, HOSPITAL AND OTHER INSTITUTIONS AVAILABLE FOR THE DISTRICT.

HOSPITALS PROVIDED OR SUBSIDISED BY THE LOCAL AUTHORITY OR BY THE COUNTY COUNCIL.

(*a*) TUBERCULOSIS.

Three hundred and seventy-eight beds are provided and maintained at various sanatoria (Yarnfield, Himley, etc.) by the Staffordshire, Wolverhampton and Dudley Joint Tuberculosis Committee. None of these institutions is situated in the United Urban District.

(*b*) FEVER.

The Bradwell Isolation Hospital, situate within the district, is maintained by the Bradwell Joint Hospital Committee, of which the Wolstanton United Urban District is a constituent authority.

The other authorities are the Urban District Councils of Kidsgrove and Audley.

The Hospital contains 78 beds, 50 of these being for scarlatina, 20 for diphtheria and eight for typhoid fever.

The estimated population which this Hospital serves is 55,740.

(*c*) SMALLPOX.

The United Urban District Council is a constituent authority of the North Staffordshire Joint Smallpox Hospital Board, whose Hospital is situated at Bagnall, North Staffordshire, but outside this district.

(*d*) CHILDREN.

The North Staffordshire Royal Infirmary and The

Cripples' Guild Hospital, Hartshill (both situate in the adjoining City of Stoke-on-Trent) are voluntary hospitals which admit children.

General medical and surgical cases are dealt with at the Royal Infirmary, while the Cripples' Hospital deals particularly with orthopædic cases.

(*e*) Maternity.

There is no special maternity hospital in the district or neighbourhood, but a certain number of cases of the acute complications of pregnancy, labour and the puerperium are admitted to the North Staffordshire Royal Infirmary.

(*f*) Other Hospitals.

The Royal Infirmary, apart from what has already been stated, admits all cases of diseases in children, and is a general medical and surgical hospital, with the special departments usually found in such an institution.

INSTITUTIONAL PROVISION FOR UNMARRIED MOTHERS, Etc.

Apart from the Union Hospital, which is situated in the adjoining City, there is no institutional provision for unmarried mothers, illegitimate infants and homeless children in the district.

AMBULANCE FACILITIES.

(*a*) For Infectious Diseases.

A motor ambulance is provided and maintained by the Bradwell Joint Isolation Hospital Committee for the removal of cases of infectious disease.

(*b*) For Non-Infectious and Accident Cases.

Accident cases are dealt with by the Police. Otherwise there is no provision.

CLINICS AND TREATMENT CENTRES.

(*a*) Maternity and Child Welfare Centres.

Three Maternity and Child Welfare Centres, which are provided and maintained by the Council, are held in the district, one at Ellison Street School Clinic, one at the Broadmeadow School Clinic, and one at Silverdale Council School Clinic. Each is open on alternate Wednesdays.

(*b*) School Clinics.

There are three School Clinics in the Urban District, one at Ellison Street School, one at Broadmeadow School, and one at Silverdale Council School. These are semi-permanent structures, consisting of a waiting-room, a treatment room and a doctor's room, and they are provided and maintained by the Local Education Authority.

(*c*) Tuberculosis.

A Tuberculosis Dispensary, provided and maintained by the Staffordshire, Wolverhampton and Dudley Joint Tuberculosis Committee, which is the tuberculosis authority for the area, is held at 4, Merrial Street, in the adjoining Borough of Newcastle-under-Lyme. Patients in the Wolstanton area attend this dispensary.

(*d*) Venereal Disease.

A venereal disease clinic is held at the North Staffordshire Royal Infirmary, in the adjoining City of Stoke-on-Trent. This clinic is maintained under a joint arrangement between the County Council and the City Council on the one hand, and the governing body of the Infirmary on the other hand.

PROFESSIONAL NURSING AT HOME.

(*a*) General.

One general nurse is maintained by the Wolstanton Nursing Association, which is a voluntary organisation, and the nurse's duties relate to the nursing of the sick poor.

(*b*) INFECTIOUS DISEASES.

The Council has been in communication with the Wolstanton District Nursing Association in an endeavour to make arrangements for the nursing of complicated cases of measles in children under five years. Unfortunately, the District Nursing Association has not been able to meet the Council in this matter. However, the Association is considering an addition to its staff, and if this addition takes place the matter will be reconsidered by the Association.

MIDWIVES.

There are 11 midwives practising in the district, all of whom are trained. None of these is subsidised.

PUBLIC HEALTH STAFF.

The Staff of the Health Department is as follows :—

1.—The Medical Officer of Health, who is appointed jointly with the neighbouring Borough of Newcastle-under-Lyme, and who also acts as School Medical Officer.

2.—One part-time Medical Officer, who attends at the Silverdale Maternity and Child Welfare Centre.

3.—One Sanitary Inspector.

4.—Three full-time Nurses, who devote 50 per cent. of their time to Maternity and Child Welfare work, and the remainder to School work and Tuberculosis visiting. The latter (Tuberculosis visiting) is done by the Urban Council's Nurses under an arrangement with the Staffordshire, Wolverhampton and Dudley Joint Committee for Tuberculosis.

5.—One Clerk.

Two of the Council's Nurses are Certified Midwives, and the Sanitary Inspector holds the Certificate of the Royal Sanitary Institute and the Special Certificate issued by the Royal Sanitary Institute with regard to proficiency in the inspection of meat and other foods.

CHEMICAL WORK.

This is dealt with in the section on the Sale of Food and Drugs Acts.

LEGISLATION IN FORCE.

The following is a list of the Adoptive Acts, byelaws and regulations relating to the public health in force in the district, together with the date of adoption :—

Act.	*Date of Adoption.*
1.—Infectious Disease (Notification) Act, 1889	October, 1904.
2.—Private Street Works Act, 1892	31st October, 1904.
3.—Public Health Acts (Amendment) Act, 1890	26th February, 1906.
4.—Public Health Acts (Amendment) Act, 1907, Sections 15 to 33 inclusive (except Section 26) of Part II. ; Part III. ; and Sections 52 to 67 (inclusive) of Part IV.	18th July, 1912.
5.—Notification of Births Act, 1907	1st December, 1912.
6.—Adoptive portions of the Public Health Act, 1925	1st April, 1926.

Byelaws and Regulations.	*Date of Adoption.*
1.—New Streets and Buildings ...	26th November, 1906.
2.—Cleansing of Footways, etc. ...	,, ,,
3.—Common Lodging-houses ...	,, ,,
4.—Nuisances	,, ,,
5.—Slaughter-houses	,, ,,
6.—Offensive Trades	,, ,,
7.—Tents, Vans and Sheds ...	,, ,,
8.—Dairies, Cowsheds and Milkshops	,, ,,

(3) SANITARY CIRCUMSTANCES OF THE AREA.

WATER SUPPLY.

The whole of the district, with the exception of the hamlets of Blackbank and High Lane, and about 26 isolated houses scattered throughout the area, obtains its water from the Staffordshire Potteries Water Board, of which the Wolstanton United Urban District Council is a constituent authority. The water for Blackbank and High Lane is obtained from the Audley Urban District Council. A few of the 26 houses already alluded to, which are isolated in rural parts of the district, and which come principally within the category of farm houses and small isolated cottages, derive their water supply from wells. In the case of the others, water for drinking purposes has to be carried for a considerable distance. The water obtained from the Staffordshire Potteries Water Board is derived from deep wells in the New Red Sand Stone, the pumping stations being situated at Hatton and Mill Meece. The water is pumped to a service reservoir at Hanchurch, from which the entire district is served. The following is an analysis of the water, kindly furnished to me by Mr. R. C. Frain, Engineer to the Staffordshire Potteries Water Board :—

Analysis.

Total solid matter dried at 212° F.	14.56 grains per gallon.
Free and Saline Ammonia ...	0.000
Albuminoid Ammonia	0.001
Nitric Nitrogen	0.24
Combined Chlorine	0.84
Oxygen absorbed in 4 hours at 80° F....	0.000
Colour through 2 feet	Very pale bluish tinge.
Appearance	Clear.

Hardness.

Before boiling	7.95°
After boiling	5.40°
Temporary	2.55°

The water is of excellent quality for drinking, and domestic and industrial purposes.

The supply is on the constant system, and the consumption in the district is at the rate of approximately 27 gallons per head per day in Wolstanton, 20 gallons per head per day in Silverdale and Chesterton.

RIVERS AND STREAMS.

The Lyme Brook flows through the district from north to south and, after passing through the Borough of Newcastle-under-Lyme, it discharges into the River Trent at a point a few miles south of the Borough. The Fowlea Brook runs in a general direction of from north to south on the east side of the district, forming for part of its course the eastern boundary of the area. After passing through the City of Stoke-on-Trent, it discharges into the River Trent. The effluents from the Holditch Sewage Farm, from Silverdale Sewage Farm, and from Crossheath Sewage Irrigation area, are discharged into the Lyme Brook, which also receives waste water from the Apedale Bye-Product Works situated in Chesterton. The Fowlea Brook receives the effluent from the Tunstall Sewage Works and from Basford Sewage Works, and waste water from the Chatterley Chemical Works situated in Wolstanton. No instance of serious pollution of these streams has been reported during the year. There has been a certain amount of trouble occasioned by drainage from stables and by refuse from houses from time to time at the head of the Fowlea Brook. Certain measures have been taken to obviate this state of affairs, but it is unlikely that conditions will be entirely satisfactory until the water course at the point alluded to has a constant adequate amount of water flowing through it, or until the stable drainage is diverted and drastic measures adopted to prevent stoppage of the existing water flow.

DRAINAGE AND SEWERAGE.

The whole of the Urbanised portion of the district, with the exception of Audley Road, Chesterton, and the hamlets of Blackbank, High Lane, Chatterley and Springwood, is sewered on the combined system.

In addition there are a number of isolated houses in the district which on account of such reasons as low site cannot discharge sewage into the existing sewers. In the majority of such cases, the sewage is dealt with in cesspools.

Sewage is disposed of at five centres, as follows :—

1. BASFORD SEWAGE WORKS. These works deal with the sewage from the Basford, Porthill, Longbridge Hayes and the Oxford Road district of Wolstanton. The works consist of constant flow sedimentation tanks and percolating filters.

2. HOLDITCH FARM SEWAGE WORKS. These works deal with the sewage from Chesterton and from Wolstanton, with the exception of the portion of the latter which drains to Basford Sewage Works. The sewage before being dealt with by broad irrigation is passed through a circular continuous flow sedimentation tank.

3. APEDALE ROAD SEWAGE WORKS. This is a small plant, consisting of a circular continuous flow sedimentation tank and a percolating filter designed to deal with the sewage from 64 houses situated in Apedale Road, Sun Street and Dixon's Row, Chesterton.

4. MILLBANK SEWAGE FARM. Here the sewage from Silverdale and Knutton is passed through continuous flow sedimentation tanks, after which the tank effluent is passed directly on to undrained land, from which it enters the Lyme Brook.

5. At CROSSHEATH SEWAGE IRRIGATION AREA, the sewage from about 200 houses and from a factory is dealt with by broad irrigation after preliminary treatment in a detritus chamber.

The Council has recognised that, owing to the amount of building being done in the area, and to the forward policy which it has adopted in the matter of privy conversion, reconstruction and amplification of the sewage disposal plants are necessary. Accordingly, plans have been got out for a large addition to the plant at the Silverdale Works, and it is hoped that the work will be begun in the near future.

CLOSET ACCOMMODATION.

The following Table shows the approximate number of each type of privy and water-closet existing in the district on December 31st, 1925 :—

	W'ton.	*S'dale.*	*C'ton.*	*Total.*
Water-closets with flushing tanks	2662	1056	977	4695
Stop Water-closets ...	206	44	91	341
Hand-flushed Water-closets	292	31	32	355
Privy Pails	20	223	60	303
Earthenware Vessels ...	47	257	167	471
Brick Privies	6	298	133	437
	3233	1909	1460	6602

During the year 219 privies have been converted into water-closets.

The following were the types of privies converted :—

Pail Closets	54
Brick Privies	27
Earthenware Vessel Privies	138
Total	219

The conversions were distributed throughout the district as follows :—

Wolstanton	7
Chesterton	118
Silverdale	94
Total	219

The following Table shows the number of privies converted to the water-carriage system each year since 1911 :—

Year.	*No. of Conversions.*
1911	128
1912	130
1913	416
1914	381
1915	108
1916	67
1917	44
1918	26
1919	70
1920	264
1921	452
1922	316
1923	291
1924	199
1925	219

The above Table shows that the Council has adopted a forward policy in the matter of privy conversion. The whole of the Wolstanton Ward, with the exception of about 80 privies (which, on account of their situation, cannot be dealt with), has now been converted to the water-carriage system. If the Council continues its enlightened conversion policy, it will not be long before the other two Wards are in a similar happy position.

During the year 1,150 yards of new drain have been laid.

During the year flushing tanks and water supply have been connected to 126 hand-flushed water-closets throughout the district as follows :—

Wolstanton	70
Silverdale	31
Chesterton	25
Total	126

SCAVENGING.

Ashes removal in the Wolstanton Ward is carried out by contract with the aid of the Council's workmen. In the Silverdale and Chesterton Wards the work is done by motor vehicles worked by the Authorities' employees. Bins in the Wolstanton Ward are cleared fortnightly, in the Silverdale Ward weekly, and in the case of Chesterton the removal is approximately at intervals of ten days. Ashpits are cleared at convenient intervals. Ashes and house refuse generally are dealt with by tipping, there being a tip in each of the Wards.

Fifty-nine galvanised iron ashbins have been provided during the year in place of open ashpits. Of these substitutions 34 were in Wolstanton, 18 in Silverdale and seven in Chesterton. During the year 71 ashbins have been renewed·

The following Table shows the approximate number of ashbins and ashpits in the district :—

	Ashbins.	*Ashpits.*
Wolstanton	1,837	1,086
Silverdale	811	582
Chesterton	591	464
Totals	3,239	2,132

The following Table shows the number of houses in which movable ashbins, with proper covering, have been substituted for open ashpits each year since 1911 :—

Year.	*Houses.*
1911	36
1912	58
1913	174

1914	128
1915	39
1916	49
1917	43
1918	25
1919	159
1920	122
1921	134
1922	127
1923	188
1924	92
1925	59

Nightsoil is collected from pail closets weekly, and fortnightly from earthenware vessels. The nightsoil is disposed of on farm land, the farms used from time to time being Birch House Farm, Crackley; Hollow Farm, Chesterton; Springwood Farm, Chesterton; School Ground Farm, Knutton, and Millbank Farm, Silverdale.

SANITARY INSPECTION IN THE AREA.

The following Table is a summary of the work done in the department of the Sanitary Inspector during the year:—

	Number of		Abatement Notices.		Nuisances abated after notice by	
	Inspections & Observations made.	Defects found.	Informal by Inspector.	Formal by Authority.	Inspector.	Authority.
Foul Conditions	52	26	26	—	26	—
Structural Defects	83	43	35	8	33	8
Overcrowding	—	—	—	—	—	—
Dairies, Milkshops & Cowsheds	67	15	15	—	15	—
Bakehouses	46	3	3	—	3	—
Slaughter-houses	613	12	12	—	12	—
Ashpits and Privies	5615	101	76	25	73	25
Deposits of Refuse and Manure	22	11	11	—	11	—
Water Closets	2783	123	105	18	104	18
House Drainage	362	199	185	14	185	14
Pigsties	39	4	4	—	4	—
	9,685	537	472	65	466	65

During the year 138 houses, nine beds and eight mattresses were disinfected. Twenty other articles of bedding were destroyed.

WORK DONE UNDER THE FACTORY AND WORKSHOPS ACT.

The following Table is a summary of the work done under the above Acts :—

1. INSPECTION OF FACTORIES, WORKSHOPS AND WORKPLACES.

Including inspections made by Sanitary Inspectors or Inspectors of Nuisances.

	Inspections.	*Written Notices.*	*Prosecutions.*
Factories .— (including Factory Laundries)	14	—	—
Workshops :— (including Workshop Laundries)	38	—	—
Workplaces :— (Other than outworkers—premises included in Part 3 of this Report)	35	1	—
Total	87	1	0

2. DEFECTS FOUND IN FACTORIES, WORKSHOPS AND WORKPLACES.

Particulars.	Number of Defec's			
	Found	Remed'd	Referred to H.M. Inspec'r	Number of Prosecutions
(1)				
Nuisances under the Public Health Acts—				
Want of Cleanliness ...	5	5		
Want of Ventilation				
Overcrowding ...				
Want of drainage of floors	3	3		
Other Nuisances ...				
Sanitary Accommodation: Insufficient	9	9		
Sanitary Accommodation: Unsuitable or Defective ...	5	5		
Sanitary Accommodation: Not separate for sexes				
Offences under the Factory and Workshops Acts—				
Illegal occupation of Underground bakehouse (S. 101)				
Breach of special sanitary requirements for bakehouses (SS. 97 to 100)				
Other Offences— (Excluding offences relating to outwork which are included in Part 3 of this Report)				
Total	22	22		

3. HOME WORK.

No list of outworkers was received from a contractor during the year.

4. REGISTERED WORKSHOPS.

Workshops on the Register (S. 131) at the end of the year	Number
See under "Factories and Workshops" above. Total number of Workshops on Register	82

5. OTHER MATTERS.

Class (1)		Number (2)
Matters notified to H.M. Inspector of Factories.		
Failure to affix abstract of the Factory and Workshop Acts. (S. 133, 1901).		
Action taken in matters referred by H.M. Inspector as remediable under the Public Health Acts, but not under the Factory and Workshop Acts (Sec. 5, 1901).	Notified by H.M. Inspector	4
	Reports (of action taken) sent to H.M. Inspector ..	4
Other		
Underground Bakehouse (S. 101) in use at the end of the year.		

The number of factories is seven.

During the year 12 visits of inspection have been paid to factories, and 70 to workshops and workplaces.

In connection with the local doll factory, no outworkers have been employed during the year.

SMOKE ABATEMENT.

During the year a complaint has been made regarding a smoke nuisance alleged to arise from a Brick and Tile Works in the Chesterton Ward. Observations on the emission of black smoke have been made by the Inspector, and the firm concerned has been communicated with drawing their attention to the existence of the nuisance, and calling upon them to adopt the best practicable means towards the abatement of the nuisance.

PREMISES AND OCCUPATIONS WHICH CAN BE CONTROLLED BY BYELAWS OR REGULATIONS.

Byelaws are in existence dealing with new streets and buildings, and for the control of common lodging-houses, offensive trades, tents, vans and sheds, dairies, cowsheds and milk shops and nuisances. There are no common lodging-houses in the district, but the Council, on the 25th February, 1924, by resolution decided that the trades of rag and bone dealer and fish frier should be considered as offensive trades, and made an Order accordingly. On May 7th, 1924, this Order was confirmed by the Ministry of Health. The offensive trades carried out in the district are :—

1	Bone Yard.
2	Tripe-boiling Works.
29	Fish Friers.

SCHOOL HYGIENE.

Generally speaking, the hygienic conditions in the Council Schools are good ; but, in the case of many of the Church Schools, the buildings are of an old date and show defects which are inherent in such old buildings. These defects relate particularly to lighting, ventilation, and also, to a lesser degree, to heating.

During the year a considerable amount of repair work to floors, etc., has been done, and the ventilation at Ellison Street Council School has been considerably improved by the provision of a number of hopper ventilators.

In 1924 a communication was received from the Board of Education stating that the condition of the premises at Silverdale Church of England School and Chesterton Church of England School was such that, in the opinion of the Board, recognition by the Board ought to be withdrawn as soon as other accommodation could be provided for the children ; or that, alternatively, recognition should be continued only after substantial alterations in the premises, or after a drastic reduction of their "accommodation," or both. The Board also requested that the Committee should take those cases into careful consideration, and should consult with the Managers. The attention of the Managers was drawn to the Board's comments, and in the case of the Silverdale Church School they have decided to proceed with the preparation of a scheme to build a new Infants' Department and to improve the present building, in accordance with the requirements of the Board, to serve as a two department school. In the case of Chesterton, the decision of the Managers has not yet been made known to the Education Committee.

(4) HOUSING.

GENERAL HOUSING CONDITIONS IN THE AREA.

In Wolstanton, which is partly residential in character, the houses are of comparatively recent date and are, for the most part, in good condition.

In Silverdale and Chesterton, which are occupied largely by the artisan and working-classes, the houses are, speaking generally, rather older, and many present defects which, however, are capable of remedy.

According to the housing survey made in 1919, 134 houses were required to meet the unsatisfied demand ; the number of houses required for all purposes, taking into account growth of the population for the years 1920, 1921 and 1922 being 1,000. During the years 1920 to 1925 inclusive, 209 houses of the type specially dealt with in the survey and 117 of other types have been erected. During the years 1923, 1924 and 1925 the estimated population of the district has increased by 210. Allowing an average of five persons per house, 42 houses would be required for this increase of the population. From these figures it will be apparent that the present housing shortage is 833 for all purposes, taking into account the houses built during the years 1920 to 1925 inclusive and the increase of the population which has accrued since 1922.

The present policy of the Council is to encourage the number of subsidy houses, which it is hoped will mitigate the shortage.

OVERCROWDING.

Only one case of overcrowding came to notice officially during the year, but there is undoubtedly considerable overcrowding in the area. The cause of overcrowding is principally the shortage of houses, and owing to this shortage it was impossible to deal drastically with the case referred to above. It is hoped that the present rate of building will reduce overcrowding.

FITNESS OF HOUSES.

The majority of the houses are of the working-class type, and the general standard of housing is indicated in the paragraph on general housing conditions in the area.

Defective floors, want of whitewashing, windows not made to open, defective yard surface, eaves guttering and rain water spouting absent or defective, dampness of walls and defective roofs are typical of the defects found to exist in unfit houses. In many cases the defects are undoubtedly due to the shortage of houses; houses being difficult to obtain and *per contra* easy to let, owners are averse to carrying out repairs unless forced to do so. In many cases, however, it must be admitted that defects are due to the continued high cost of labour and materials, the expense to be incurred in the remedying of defects being in many instances out of all proportion to the rents actually obtained from the property. In a considerable proportion of the cases also, it must be admitted that, particularly in the matter of the poorer-classed property, the defects are due primarily to acts of waste or neglect by the tenants.

Housing defects are dealt with by informal action on the part of the Council or by proceedings under the Public Health Acts.

Conditions, so far as they affect housing, as regards water supply, closet accommodation and refuse disposal, are dealt with under their respective headings in the preceding part of this Report.

UNHEALTHY AREAS.

No complaints have been received nor representations made regarding unhealthy areas.

BYELAWS RELATING TO HOUSES, ETC.

New byelaws relating to streets and buildings have lately been adopted by the Council, and came into force on the 1st April of this year. Byelaws relating to other matters are dealt with under " Premises, etc., controlled by Byelaws."

GENERAL AND MISCELLANEOUS.

Proceedings were taken under Section 32 of the Housing, Town Planning, etc., Act, 1919, against the owner of a house in respect of which a closing order had been made and against the person occupying the premises for, in the case of the owner, allowing the premises to be occupied as a dwelling-house, and in the case of the occupier for occupying the premises as a dwelling-house.

A conviction was obtained, and the premises were vacated.

HOUSING STATISTICS FOR THE YEAR 1925.

Number of new houses erected during the year :—

(*a*) Total (including numbers given separately under (*b*))	99
(*b*) With State assistance under the Housing Acts :	
(i.) By the Local Authority	—
(ii.) By other bodies or persons	80

1. *Unfit dwelling-houses.*

Inspection—(1) Total number of dwelling-houses inspected for housing defects (under Public Health or Housing Acts)	73

(2) Number of dwelling-houses which were inspected and recorded under the Housing (Inspection of District) Regulations, 1910, or the Housing Consolidated Regulations, 1925 22

(3) Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation ... —

(4) Number of dwelling-houses (exclusive of those referred to under the preceding sub-head) found not to be in all respects reasonably fit for human habitation ... 51

2. *Remedy of defects without Service of formal Notices.*

Number of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or their officers... 17

3. *Action under Statutory Powers.*

A.—Proceedings under section 3 of the Housing Act, 1925.

(1) Number of dwelling-houses in respect of which notices were served requiring repairs ... ... —

(2) Number of dwelling-houses which were rendered fit after service of formal notices —

(*a*) By owners ... ... —

(*b*) By Local Authority in default of owners ... ... —

(3) Number of dwelling-houses in respect of which Closing Orders became operative in pursuance of declarations by owners of intention to close ... ... —

B.—Proceedings under Public Health Acts.

(1) Number of dwelling-houses in respect of which notices were served requiring defects to be remedied 1

(2) Number of dwelling-houses in which defects were remedied after service of formal notices 1

(*a*) By owners 1

(*b*) By Local Authority in default of owners ... ... —

C.—Proceedings under sections 11, 14 and 15 of the Housing Act, 1925.

(1) Number of representations made with a view to the making of Closing Orders ...	—
(2) Number of dwelling-houses in respect of which Closing Orders were made ...	—
(3) Number of dwelling-houses in respect of which Closing Orders were determined, the dwelling-houses having been made fit	—
(4) Number of dwelling-houses in respect of which Demolition Orders were made ...	—
(5) Number of dwelling-houses demolished in pursuance of Demolition Orders... ...	—

(5) INSPECTION AND SUPERVISION OF FOOD.

MILK SUPPLY.

The quality of the milk produced within or imported into the district appears to be on the whole of a good standard. During the years 1921 to 1925 inclusive, 246 samples of milk have been examined, and only five, 2.32 per cent. of these were found to be not genuine. There are at present on the register :—

Cow Keepers	44
Dairymen and Purveyors of Milk	18

MEAT.

During the year 613 visits were made to slaughterhouses for the inspection of meat at the time of slaughter, 2.497 carcases being inspected. No arrangements are made for marking meat under the Public Health (Meat) Regulations, 1924.

On the whole, the Public Health (Meat) Regulations, 1924, are being properly observed by the meat dealers of the district.

There is no public slaughterhouse in the area. The following Table shows the number of private slaughterhouses in use in the area at the dates mentioned :—

	In 1920.	*In January,* 1925.	*In December,* 1925.
Registered ...	15	12	12
Licensed	2	4	4
Total ...	17	16	16

On the whole, the condition of these slaughterhouses is good ; but they possess the disadvantages which are inherent in all private slaughterhouses.

During the year the following defects were found in slaughterhouses :—

Five slaughterhouses overdue for limewashing, four choked drains and three accumulations of manure. All these defects were remedied.

The following Table shows the meat and other articles of food which were surrendered and destroyed during the year :—

Beef (1,064 lbs.) ...	Tuberculous.
25 livers...	Tuberculous and liver flukes.
Five heads	Tuberculous.
Five tongues ...	,,
Four hearts	,,
Three whole pigs ...	2 tuberculous and 1 erysipelas.
One calf	Emaciated.

OTHER FOODS.

The sanitary condition of bakehouses and other premises where foods are manufactured appears to be satisfactory.

FOOD POISONING.

In the Summer of 1923 an outbreak of food poisoning, involving four persons, occurred in the Chesterton Ward.

This outbreak was found to be due to Salmonella Toxins contained in tinned tongue which the affected persons had eaten. The matter is fully dealt with in my Report for the year 1923.

SALE OF FOOD AND DRUGS ACTS, AND MILK AND CREAM REGULATIONS, 1912 AND 1917.

The Urban District Council is not an Authority under the Sale of Food and Drugs Acts and Milk and Cream Regulations ; but I am indebted to Mr. E. W. Horton Knight, Inspector under the Food and Drugs Acts for North Staffordshire, for the following information regarding samples taken in the Urban District for examination by the Public Analyst.

Fifty-five samples of milk, two of preserved cream and one of cream were taken. All of these were genuine with the exception of one of the milk samples which was deficient in fat and one of the preserved cream samples which contained an excess of boric acid. In both cases the vendors were cautioned.

The other samples taken were :—

Butter	6
Lard	3
Pepper	2
Self-raising Flour	2
Condensed Milk	2
Vinegar	1
Sponge Cake	1

All these were certified as being genuine.

(6) PREVALENCE OF, AND CONTROL OVER, INFECTIOUS DISEASES.

INFECTIOUS DISEASES GENERALLY.

Table X. (Page 52) shows the notification of various infectious diseases for each year since 1905, and Table XI. (Page 53) shows the number of corrected deaths from each of the principal zymotic diseases since 1911, together with the zymotic death-rate for each year.

TABLE X.—*Shews the Notifications of various Diseases for each Year since 1905.*

YEAR	Scarlet Fever	Diptheria.	Erysipelas.	Enteric Fever.	Continued Fever.	Puerperal Fever.	Small Pox.	Ophthalmia.	Poliomyelitis	Encephalitis Lethargica	Measles	Cerebro-spinal Fever	Pneumonia	Malaria	Dysentery	Phthisis	Other forms of Tuberculosis
1905	120	44	17	11	—	1	—	—	—	—	—	—	—	—	—	—	—
1906	174	65	21	16	—	—	—	—	—	—	—	—	—	—	—	—	—
1907	88	31	24	5	—	2	—	—	—	—	—	—	—	—	—	—	—
1908	43	30	6	10	—	2	—	—	—	—	—	—	—	—	—	—	—
1909	32	36	9	9	—	3	—	—	—	—	—	—	—	—	—	3	—
1910	89	54	19	7	—	2	—	4	—	—	—	—	—	—	—	6	—
1911	221	38	20	5	—	3	—	—	—	—	—	—	—	—	—	20	—
1912	156	38	10	9	—	2	—	2	—	—	—	—	—	—	—	49	—
1913	53	44	9	4	—	1	—	2	—	—	—	—	—	—	—	41	16
1914	76	45	23	6	—	4	—	10	—	—	—	—	—	—	—	32	6
1915	256	43	15	2	—	2	—	5	—	—	—	—	—	—	—	25	9
1916	219	50	5	6	—	2	—	1	—	—	386	—	—	—	—	34	7
1917	38	32	8	2	—	2	—	5	—	—	333	1	—	—	—	32	4
1918	19	19	5	2	—	1	—	2	—	—	359	—	—	—	—	35	15
1919	66	19	11	—	—	—	—	9	—	1	15	—	46	35	3	46	12
1920	40	61	11	3	—	5	—	4	—	—	—	—	7	—	—	36	6
1921	31	33	6	—	—	2	—	2	2	—	—	—	14	—	—	44	10
1922	116	123	12	1	—	—	—	5	—	—	—	—	15	—	—	38	5
1923	169	60	18	—	—	—	—	4	—	—	—	—	38	—	—	76	16
1924	147	49	27	9	—	1	—	7	—	—	—	—	97	1	—	58	9
1925	84	47	13	2	—	2	—	2	4	—	—	—	60	—	—	39	18

TABLE XI.—Shews the number of corrected deaths from each of the seven principal Zymotic Diseases since 1912.

	1912	1913	1914	1915	1916	1917	1918	1919	1920	1921	1922	1923	1924	1925
Smallpox ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Measles ...	9	1	5	6	13	4	6	—	6	—	—	8	—	2
Scarlatina ...	3	—	3	2	11	—	—	2	1	2	2	4	1	2
Diptheria ...	—	10	4	4	4	3	7	2	11	—	4	5	3	3
Diarrhœa & Enteritis (Under 2 years) ...	11	19	15	13	8	4	3	4	7	14	8	3	8	5
Whooping Cough ...	1	7	2	5	3	2	1	8	5	6	9	1	—	7
Enteric Fever ...	2	2	3	2	4	1	—	—	—	—	—	—	1	1
Total ...	26	39	32	32	43	14	17	16	30	22	23	21	13	20
Rate per 1000 of the Population	.93	1.36	1.1	1.15	1.6	.5	.63	.54	.98	.74	.767	.696	.43	.66

Scarlet Fever.

The years 1922, 1923 and 1924 were marked by an increased prevalence of scarlet fever. During these three years 432 cases of the disease were notified, the number of notifications during 1925 being 84. The last epidemic period was in the years 1915 and 1916, when 475 cases were notified. In the period of 1922 onwards the disease, though prevalent, was of a mild type ; the case mortality for the 516 cases notified being 1.74 per cent. The case mortality in the 1916 epidemic was 5.02.

Diphtheria.

The summer of 1922 was marked by a greatly-increased prevalence of diphtheria. Again, the disease, though prevalent, was mild in type ; the case mortality of the notified cases being 3.2. The cause of the increased prevalence of diphtheria in 1922, and the measures taken to deal with the outbreak, were fully dealt with in my Annual Report for that year.

Whooping Cough and Measles.

Whooping cough was more than usually prevalent in 1921, 1922 and 1925. Measles showed an incidence above the average in 1923.

Diarrhœa and Enteritis.

With regard to the death-rate from diarrhœa and enteritis in children under two years of age, the rate for the United Urban District has generally been higher than the corresponding rate for England and Wales with the exception of the year 1923, when the district rate was considerably the lower of the two, and this year, when the two rates are identical.

Pneumonia.

The following Table shows the deaths from, and the notifications of, pneumonia each year since 1921 :—

	Deaths.	*Cases notified.*
1921	19	14
1922	28	15
1923	30	38
1924	38	97
1925	29	60

Influenza.

The following Table shows the death-rates from influenza compared with the rates experienced in the country generally:

	Death-Rate. *United Urban District.*	*Death-Rate.* *England and Wales.*
1921 ...	.369	.237
1922 ...	.367	.563
1923 ...	.266	.220
1924 ...	.233	.489
1925 ...	.364	.32

ADOPTIVE ACTS, Etc.

Under arrangements made by the Staffordshire County Council, specimens for bacteriological examination are sent to the County Bacteriological Laboratory at Lichfield.

Any practitioner in the district may, without cost, have throat swabbings examined for diphtheria bacilli, sputum examined for tubercle bacilli, and blood examined for the Widal reaction. Duplicates of the results of individual examinations are sent to the Medical Officer of Health. The following Table shows the number of pathological specimens sent for examination during the year 1925 :—

	From Bradwell Isolation Hospital.	*By Private Practitioners.*	*Total.*
Throat Swabs for diphtheria bacilli	405	19	424
Blood for Widal reaction ...	—	2	2
Sputum for Tubercle bacilli ...	—	15	15
Total	405	36	441

DISINFECTION.

A high pressure steam disinfector is available for disinfection at the Bradwell Hospital. Houses, etc., are disinfected by means of sulphur fumigation, formaline spray, or the alformant lamp. Facilities for the disinfection of verminous persons are available at the Local Guardians' Institutions which, however, are situated outside the district.

NOTIFIABLE DISEASES (OTHER THAN TUBERCULOSIS) DURING THE YEAR 1925.

Table XII. (Page 57) shows the cases of infectious disease notified during the year.

Table XIII. (Page 58) shows the deaths from notifiable diseases during the year.

There was a fall in the number of notifications of scarlet fever and diphtheria, most marked in the case of the former, received during 1925 compared with the previous three years. The death-rate from scarlet fever for the year is .066, that for diphtheria being .099.

Table II. (Page 10) shows the comparison between these rates and those experienced in the country generally and in the areas into which the country is divided for statistical purposes.

There was a considerable incidence of whooping cough during the year. The death-rate due to this cause being .232 per 1,000.

TABLE XII.—Cases of Infectious Diseases notified during 1925.

NOTIFIABLE DISEASES	NUMBER OF CASES NOTIFIED													Total Cases notified in each Ward			Total cases remov'd to Hospital	Percentage of cases removed to Hospital
	At all Ages	AT ALL AGES																
		Under 1	1 and under 2	2 and under 3	3 and under 4	4 and under 5	5 and under 10	10 and under 15	15 and under 20	20 and under 35	35 and under 45	45 and under 65	65 years and over	WOLSTANTON	CHESTERTON	SILVERDALE		
Diphtheria (including Membranous Croup) ..	47	2		3	1	2	24	5	5	4		1		17	18	12	44	93.62
Scarlet Fever	84	1	1	1	4	6	41	13	11	5	1			38	16	30	73	86.9
Erysipelas	13			1						5	2	5		7	4	2		
Enteric Fever	2									1	1				2			
Puerperal Fever	2									2				1		1		
Ophthalmia Neonatorum ..	2	2												1		1		
Pnuemonia	60	3	6	2	4		11	1	8	10	7	4	4	22	8	30		
Polio Encephalitis ..	1				1											1		
Poliomeyelitis ..	4			2		1	1							3	1			
Pulmonary Tuberculosis ..	39	1	3	1	1		5	7	2	10	6	3		19	13	7		
Other forms of Tuberculosis	18	1	1	1		2	6	4	2			1		6	9	3		

TABLE XIII.—Deaths from Notifiable Diseases during 1925.

NOTIFIABLE DISEASES	At all Ages		TOTAL NUMBER OF DEATHS. At all Ages. Under 1		1 and under 2		2 and under 3		3 and under 4		4 and under 5		5 and under 10		10 and under 15		15 and under 20		20 and under 35		35 and under 45		45 and under 65		65 years and over		Total deaths in each Ward. Wolstanton		Chesterton		Silverdale	
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F
Diphtheria (including Membranous Croup) ..	2	1					1						1											1					2	1		
Scarlet Fever		2												1				1										1				1
Erysipelas	1																								1						1	
Enteric Fever		1																				1								1		
Puerperal Fever																																
Ophthalmia Neonatorum ..																																
Pneumonia	24	5	1	1	6	1	3						1					1	2		2	1	6		3	1	12	1	5	1	7	3
Pulmonary Tuberculosis ..	17	17			2											2	1	2	1	7	4	3	8	3	1		6	10	5	5	6	2
Other forms of Tuberculosis	4	3	1		2	1						1	1			1												1	3	2	1	

There were only two deaths from measles, which number yields a death-rate of .066. Consultation of Table II. (Page 10) will show that the death-rate due to the former disease is, for this year, above that of England and Wales, whereas that due to the latter disease is considerably below the death-rate experienced in the rest of the country.

There were two cases of ophthalmia neonatorium notified, and both recovered with unimpaired vision. This number is considerably below the average experienced of the district.

TUBERCULOSIS.

General.

Table XIV. (Page 61) shows the notifications of, and the deaths from, tuberculosis each year since 1909.

The following Table shows the number of deaths from pulmonary tuberculosis, and the rates per 1,000 of the population, for each year since 1909 :—

Year.	*No. of Deaths.*	*Death-rate per* 1,000.
1909	12	.402
1910	16	.519
1911	20	.73
1912	16	.57
1913	23	.806
1914	26	.89
1915	22	.79
1916	24	.89
1917	20	.72
1918	19	.70
1919	19	.64
1920	19	.62
1921	20	.67
1922	22	.734
1923	30	.998
1924	21	.698
1925	31	1.127

The following Table shows the deaths and death-rates from all forms of tuberculosis for each year since 1909 :—

Year.	*Deaths.*	*Death-rate.*
1909	22	.737
1910	27	.876
1911	35	1.28
1912	36	1.289
1913	34	1.192
1914	31	1.07
1915	42	1.52
1916	34	1.269
1917	31	1.118
1918	27	1.005
1919	21	.71
1920	25	.821
1921	27	.905
1922	25	.834
1923	41	1.363
1924	29	.964
1925	41	1.36

TABLE XIV.—The following Table shows the notifications of, and the deaths from Tuberculosis since the year **1909**.

	1909	1910	1911	1912	1913	1914	1915	1916	1917	1918	1919	1920	1921	1922	1923	1924	1925
Deaths from Tuberculosis of the Lungs	12	16	20	16	23	26	22	24	20	19	19	19	20	22	30	21	34
Deaths from other forms of Tuberculosis	10	11	15	20	11	5	20	10	11	8	2	6	7	3	11	8	7
Total Deaths from Tuberculosis ...	22	27	35	36	34	31	42	34	31	27	21	25	27	25	41	29	41
Notification of Lung Tuberculosis ...	3	6	20	49	41	32	25	34	32	35	46	36	44	38	76	58	39
Notification of other forms of Tuberculosis	—	—	—	—	16	6	9	7	4	15	12	6	10	5	16	9	18
Total Notifications	3	6	20	49	57	38	34	41	36	50	58	42	54	43	92	67	57

Comparison of the above rates with those of England and Wales as a whole shows that, with the exception of this year and the year 1923, the experience of the United Urban District is better than that of the country generally. The upward movements in 1923 and in the year under review may be due to the violent fluctuations which occur in figures calculated from small numbers.

The tuberculosis authority for the district is the Staffordshire, Wolverhampton and Dudley Joint Tuberculosis Committee. This committee has a dispensary at Newcastle, which is attended by patients in the United Urban District. This committee maintains sanatoria at Groundslow, Himley, etc., containing 378 beds.

Under an arrangement with the committee by the Urban District Council, the Council's three nurses carry out the visitation of tuberculous cases in the United District. In this portion of their work they act under the control of the Tuberculosis Officer for North Staffordshire.

One thousand five hundred and eighty-three visits were paid to tuberculous persons.

The total number of cases on the register at the end of the year was 203.

TUBERCULOSIS DURING THE YEAR 1925.

Table XV. (Page 63) shows the cases of tuberculosis notified during the year, and Table XVI. (Page 64) shows the deaths from tuberculosis during the year.

TABLE XV.—Cases of Tuberculosis notified during 1925.

SITE	SEX	TOTAL CASES NOTIFIED.															Total Cases notified in each Ward		
		At all Ages	At all Ages																
			Under 1	1 and under 2	2 and under 3	3 and under 4	4 and under 5	5 and under 10	10 and under 15	15 and under 20	20 and under 25	25 and under 35	35 and under 45	45 and under 55	55 and under 65	65 years and over	Wolstanton	Chesterton	Silverdale
LUNGS	Male	16	1	3	1				2		1	2	5	1			8	4	4
	Female	23				1		5	5	2	3	4	1	2			11	9	3
	Total	39	1	3	1	1		5	7	2	4	6	6	3			19	13	7
OTHER SITES	Male	9	1	1			1	2	2	1					1		3	4	2
	Female	9			1		1	4	2	1							3	5	1
	Total	18	1	1	1		2	6	4	2					1		6	9	3
ALL SITES	Total	57	2	4	2	1	2	11	11	4	4	6	6	3	1		25	22	10

TABLE XVI.—Deaths from Tuberculosis during 1925.

SITE	SEX	TOTAL DEATHS.															Total Deaths in each Ward		
		At all Ages	At all Ages																
			Under 1	1 and under 2	2 and under 3	3 and under 4	4 and under 5	5 and under 10	10 and under 15	15 and under 20	20 and under 25	25 and under 35	35 and under 45	45 and under 55	55 and under 65	65 years and over	Wolstanton	Chesterton	Silverdale
LUNGS	Male	17		2						1	1		4	4	4	1	6	5	6
	Female	17							2	2	1	6	3	2	1		10	5	2
	Total	34		2					2	3	2	6	7	6	5	1	16	10	8
OTHER SITES	Male	4	1	2				1										3	1
	Female	3		1			1		1								1	2	
	Total	7	1	3			1	1	1								1	5	1
ALL SITES	Total	41	1	5			1	1	3	3	2	6	7	6	5	1	17	15	9

Of the 41 deaths from Tuberculosis only 27 or 66 *o/o* had been notified, of the 34 deaths from Pulmonary Tuberculosis 22 or 64.7 *o/o* had been notified, and of the 7 deaths from other forms of Tuberculosis 5 or 71.4 *o/o* had been notified.

The attention of general Practitioners in the district should again be drawn to their obligations in the matter of the notification of cases of Tuberculosis.

(7) MATERNITY AND CHILD WELFARE.

The Maternity and Child Welfare scheme is organised under the Maternity and Child Welfare Committee of the Council, which consists of six members of the Council and two co-opted members, both of whom are women.

The Council employs three whole-time nurses, who devote 50 per cent. of their time to maternity and child welfare work, the remaining 50 per cent. being taken up by school work, etc.

Three maternity and child welfare centres are in operation in the district, one in each of the Wards. These centres are held one at Ellison Street School Clinic, one at Broadmeadow School Clinic, and the third at Silverdale Council School Clinic. Each is open on alternate Wednesdays, the Wolstanton and Silverdale centres being in operation from 2 to 4 o'clock in the afternoon and the Chesterton centre from 11 to 1 o'clock in the forenoon. The Medical Officer of Health attends at the Wolstanton and Chesterton centres, medical attention at the Silverdale centre being given by Dr. F. Gibbens, a part-time officer. Mothers and children are seen regularly by the medical officer attending, advice is given with regard to the proper method of feeding young children, etc., minor ailments receive direct treatment, and in the case of graver disorders advice is given as to the agency from which treatment should be secured. In addition, a sewing class is held at each of the centres, the class being under the supervision of a part-time servant of the Council, and dried milk and virol is sold to suitable cases at cost price.

During the year under review 583 births were notified ; of these 222 were in Wolstanton, 188 in Chesterton and 173 in Silverdale. Four hundred and ninety-nine of the notifications were sent by midwives and 84 by doctors. Of the births notified, 26 were stillbirths. Five hundred and sixty-seven primary visits were paid by health visitors : 204 in Wolstanton, 190 in Chesterton and 173 in Silverdale. In addition to the primary visits, 3,438 return visits were made: 966 in Wolstanton, 1,107 in Chesterton and 1,356 in Silverdale, in order to note the progress of the babies and, where necessary, to give further advice and practical assistance.

Among those visited, 456 were breast-fed, 82 bottle-fed, and 29 partly breast and partly bottle fed.

In the great majority of cases among the bottle-fed the hygienic tubeless bottle was in use; and, in the few cases in which it was not in use, it was substituted by the mother when recommended by the health visitor.

Forty-six visits were paid to houses where a death had occurred under one year of age.

The general condition of the houses was noted to be as follows:—

Good	39
Fairly good	5
Poor	2
Total	46

Among the mothers visited of infants who died, the occupations of the mothers were as follows:—

Housewives	41
Pottery operatives	3
Fustian cutters	2
Total	46

All the stillbirths notified were investigated. Of these 15 were males and 11 females. Five were born prematurely, the remainder being at full term. In all cases except four the mother did not go out to work. Three of the four who worked outside the home were engaged in the fustian-cutting industry, the remaining one working as a charwoman.

In three cases the stillbirth was associated with death of the mother. In the remaining cases the following abnormalities were noted :—

Abnormal presentations	4
Hydrocephalus	2
Contracted pelvis	2
Accidental hæmorrhage	1
Prolonged instrumental labour	1
Macerated feotus	2
Pneumonia in the mother	1

The incidence of puerperal fever and maternal mortality generally is considered under " deaths connected with childbearing " on Page 22.

Ophthalmia neonatorium is considered in the section on infectious diseases on Page 59.

Two thousand five hundred and nine visits were paid to children between the ages of one and five years : 958 in Wolstanton, 864 in Chesterton and 687 in Silverdale.

The following were the defects found :—

Infectious diseases : Measles, Whooping cough, etc.	62
Bronchitis or pneumonia	50
Diseases of the skin	45
Injuries	16
General diseases	18
Other miscellaneous diseases	18
Total	209

In the case of children who were not already under medical treatment, the parent or guardian was recommended to secure treatment.

The Maternity and Child Welfare Centres in the Wolstanton and Chesterton Wards have been in being for some time, but the one in the Silverdale Ward has been functioning only since December 9th, 1925. The average attendances per session during 1925 at each of the centres was 49.4 Wolstanton, 28.5 Chesterton, nine Silverdale.

Of the total attendances, only 45 were made by expectant mothers. It is much to be regretted that the number of expectant mothers attending is so very small, and it is hoped that as the work done at the centres becomes better known, this number will increase both materially and rapidly.

During the financial year ended March 31st, 1926, £19, 6s. 2d. was expended in the provision of milk to expectant and nursing mothers and young children.